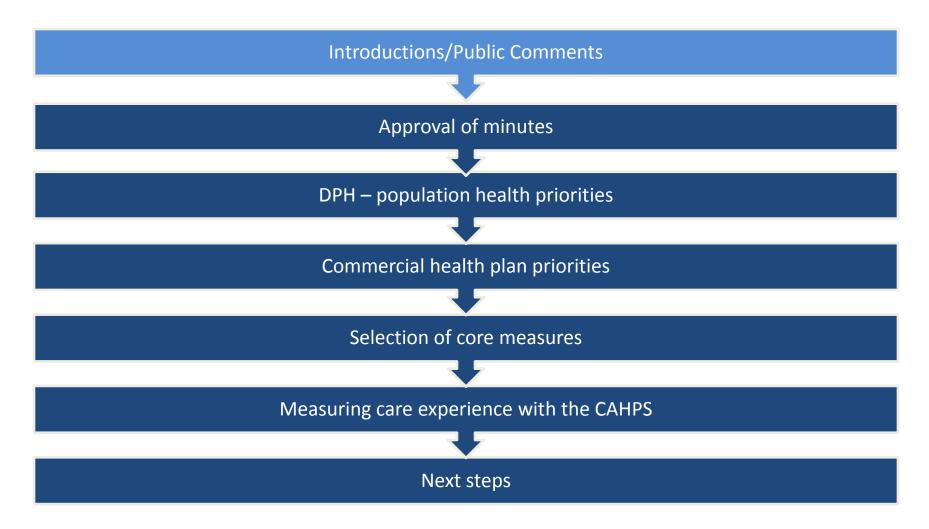
Quality Council

October 29, 2014





Agenda



Welcome to the Quality Council

Gregory Barbiero	Kathleen Harding
CHNCT/DSS	Community Health Center, Inc.

Rohit Bhalla	Gigi Hunt
Stamford Hospital	Cigna

Aileen Broderick	Elizabeth Krause
Anthem Blue Cross Blue Shield	Connecticut Health Foundation

Mehul Dalal	Kathy Lavorgna
Department of Public Health	General Surgeon

Mark DeFrancesco	Steve Levine
Westwood Women's Health	ENT and Allergy Associates, LLC

Deb Dauser Forrest	Robert Nardino
ConnectiCare	American College of Physicians – CT Chapter

Daniela Giordano	Donna Laliberte O'Shea
NAMI Connecticut	United Healthcare

Karin Haberlin	Arlene Murphy
Dept. of Mental Health & Addition Services	Consumer Advisory Board

Welcome to the Quality Council

Meryl Price

Health Policy Matters

Aetna

Jean Rexford

CT Center for Patient Safety

Steve Wolfson

Todd Varricchio

Cardiology Associates of New Haven PC

Rebecca Santiago

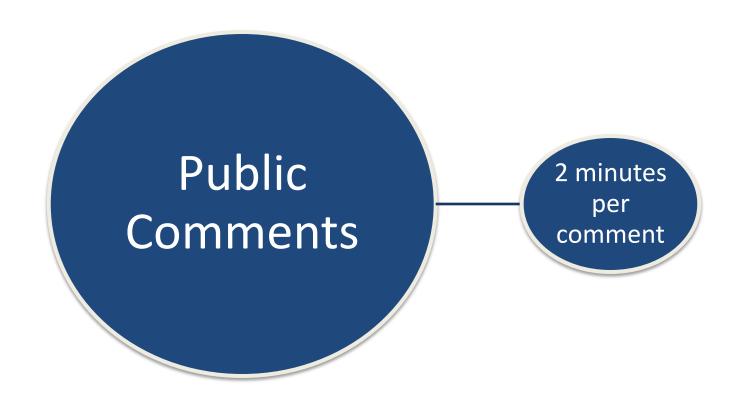
Saint Francis Center for Health Equity

Thomas Woodruff

Office of the State Comptroller

Andrew Selinger

ProHealth Physicians



CAHPS Survey Tools

Consumer Assessment of Healthcare
Providers and Systems (CAHPS) surveys ask
consumers and patients to report on and
evaluate their experiences with health care

Survey Types

- Agency for Healthcare Research and Quality (AHRQ) project which began 1995
- Originally focused on health care plans, expanded to address range of health care services
 - Hospital (inpatient)
 - Health Plan Survey (commercial, Medicaid, Children's Health Insurance Program (CHIP), Medicare
 - Clinician and Group (primary or specialty care providers and staff)

Survey Types

- Additional surveys
 - Home Health Care
 - Nursing Home
 - Surgical
 - Dental
 - ECHO (Mental health/substance abuse)
 - Dialysis

Survey Tools Versions related to SIM



- Medicare SSP to assess and reward ACO performance
- Aligns with guiding principles to maximize alignment with the Medicare Shared Savings Program (SSP)



- NCQA version to assess PCMH performance
- CAHPS-CG
 (clinician/group) version
 for PCMH which contains
 core items from CAHPS CG plus supplemental
 items for key medical
 home performance

CAHPS Background

- Standardized surveys of patients' experiences
- Patients to report on and evaluate their experiences with health care
- Cover topics that are important to consumers and focus on aspects of quality, such as the communication skills of providers and ease of access to health care services

CAHPS Users

- CMS: Centers for Medicare & Medicaid Services
- The National Committee for Quality Assurance (NCQA)
- Veterans Health Administration (VHA) and Department of Defense (DOD)
- Multi-stakeholder organizations
- Health systems, physician practices, hospitals, and other health care providers
- Patients and consumers, quality monitors and regulators, provider organizations, health plans, community collaboratives, and public and private purchasers of health care

CAHPS Assumptions (AHRQ)

- Advancing patient-centered care by giving patients effective surveys and information to help them make better health care decisions
- CAHPS surveys ask patients for both overall ratings as well as reports about specific aspects of care, providers, and systems
- Capture information on patients' experiences rather than their satisfaction

CAHPS Research Organizations

The CAHPS Consortium refers to the research organizations involved in the development, dissemination, and support:

- AHRQ
- CMS
- RAND, the
- Yale School of Public Health
- Westat

"RAND and the Yale School of Public Health work with AHRQ and other Federal agencies to develop, test, and maintain the surveys and to produce resources that support and evaluate their use in reports and improvement initiatives"

Context of CAHPS surveys, the term "consumers"

 Those who could take a survey about their experience with health care, including patients, parents and guardians of children, nursing home residents and their families, and health plan enrollees.

 Those who could use the results of the survey to inform themselves about their options and choose among providers or plans.

Examples of CAHPS Domains

- Access
- Communication
- Coordination of care
- Office staff courtesy, helpfulness, and respect
- Customer service

Certain core items must be included in domains or functions of CAHPS surveys

Medicare ACO Performance Measures

- 8 domain questionnaire (69 questions) or 12 domain questionnaire (80 questions)
- Looks back over 6 month period through a survey mailing and a follow-up phone call to non-respondents
- Determines whether an ACO qualifies for shared savings
- Administered by approved CAHPS ACO survey vendors

Medicare ACO Performance Measures

- Only the first 7 domains are used to reward performance
- Beginning in 2015, Medicare will add domain 12 to the list of domains that are tied to quality performance.

Medicare ACO Domain List

- 1) Getting Timely Care
- 2) Provider Communication
- 3) Rating of Provider
- 4) Access to Specialists
- 5) Health Promotion and Education
- 6) Shared Decision-making
- 7) Health Status/Functional Status
- 8) Courteous/Helpful Office Staff**
- 9) Care Coordination
- 10) Between Visit Communication
- 11) Education About Medication Adherence
- 12) Stewardship of Patient Resources***

- 1-8 required for Shared Savings in the final rule
- 8 also in CG-CAHPS survey**
- 9-12 supplemental
- 12 -2015*** to be added

NCQA Performance Measures: PCMH

- NCQA worked with AHRQ to develop a special version of the CAHPS-CG (clinician/group) for PCMH
- PCMH CAHPS contains core items from CAHPS-CG plus supplemental items that pertain to key medical home performance areas
- Connecticut Medicaid program is currently using the PCMH CAHPS

NCQA Performance Measures: PCMH

- Recognizes practices, or practices applying for recognition to earn distinction by submitting results to NCQA
- Submitted data will be used to develop a benchmarking database that will allow comparison across practices
- Practices must use an NCQA Certified Survey Vendor

NCQA Performance Measures: PCMH

- Survey captures patients' experiences of care in the last 12 months
- PCMH CAHPS Survey can be implemented in five modes of data collection: mail, telephone, Interactive Voice Response [IVR], Internet or mixed communication channels.
- The survey lays the groundwork for measuring and improving a practice's delivery of care and assessing how well the practice is achieving the goals of the patient-centered medical home

CAHPS PCMH Survey Domains

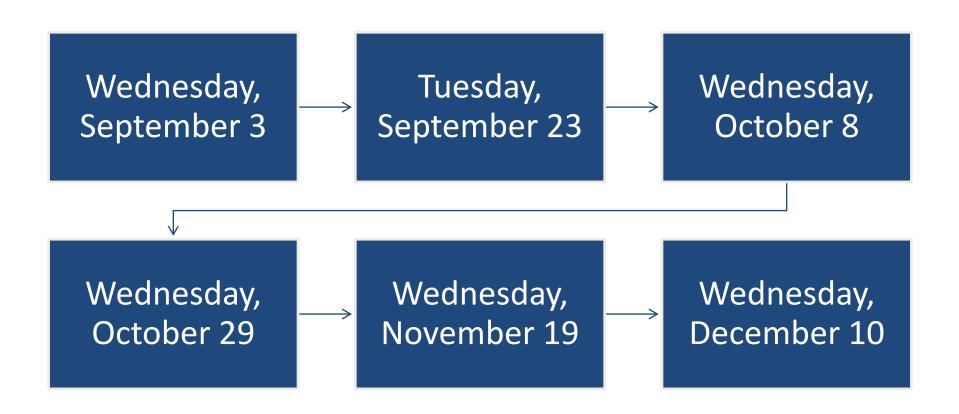
- Access
- Information
- Communication
- Coordination of care
- Comprehensiveness
- Self-management support and shared decision making

CAHPS Surveys and Tools to Advance Patient-Centered Care

NEXT STEPS

Questions

Quality Council Meeting Schedule



Guide to Acronyms

AHRQ Agency for Health Research and Quality

AMH Advanced Medical Home

BFO Best and Final Offer

CMMI Center for Medicare and Medicaid Innovation

CMS Centers for Medicare and Medicaid Services

DAS Department of Administrative Services (CT)

DMHAS Department of Mental Health and Addiction Services

DPH Department of Public Health (CT)

EEO Equal Employment Opportunity

EST Eastern Standard Time

FQHC Federally Qualified Health Center

Guide to Acronyms

FOIA Freedom of Information Act (CT)

HIE Health Information Exchange

HIT Health Information Technology

HIX Health Insurance Marketplaces

IPA Independent Practice Association

NCQA National Committee for Quality Assurance

NHRQ National Healthcare Quality Report

NQF National Quality Forum

PMO Project Management Office

• RFP Request for Proposals

SIM State Innovation Model

SSP Shared Savings Program